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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
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Application Number	10/763,138
Filing Date	01/22/2004
First Named Inventor	Vincent
Art Unit	
Examiner Name	
Attorney Docket Number	BOW 1335-048

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 08698

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

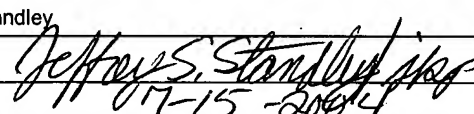
The reasons for this request are: Applicant/assignee has instructed the undersigned to transfer the file to the law firm listed below and to take no further action on behalf of applicant. The file has been transferred.

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